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IMPORTANT NOTICE
TELECOPY/FACSIMILE COVER LETTER

TO: U.S. Patent and Trademark Office
Examiner: Alonzo Chambliss
Art Unit: 2814

DATE: April 4, 2005FROM: Dariusz G. Adli

TIME: _____

TOTAL NO. OF PAGES, INCLUDING COVER: 3

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MESSAGE:

RE: U.S. Patent Application Serial No.: 10/661,372; Our Ref. 81751.0065

I hereby certify that the following documents:

- Response to Restriction Requirement
- Amendment Transmittal Letter

are being facsimile transmitted to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, for filing in the above application.

April 4, 2005
Date of Deposit


Diane Zynn

TELECOPY/FAX NUMBER: 703-872-9306 - Art Unit 2814CLIENT NUMBER: 81751.0065ATTORNEY BILLING NUMBER: 5214CONFIRMATION NUMBER: (please return fax to Diane Zynn)

FORM PTO-1083

81751.0065

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Takahiro IMAI

Serial No: 10/661,372

Filed: September 12, 2003

For: SEMICONDUCTOR DEVICE AND METHOD
OF MANUFACTURING THE SAME, CIRCUIT
BOARD, AND ELECTRONIC INSTRUMENT

Confirmation No.: 6684

Art Unit: 2814

Examiner: Alonzo Chambliss

I hereby certify that this correspondence
is being transmitted via facsimile to
(703) 872-9306:
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450 on

April 4, 2005

Date of Deposit

Diane Zynn

Name

Signature *Diane Zynn* 04/04/05

Date

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is an amendment in the above-identified application.

☒ No additional fee is required.

The fee has been calculated as shown below:

	(Col. 1) CLAIMS REMAINING AFTER AMENDMENT		(Col. 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Col. 3) PRESENT EXTRA*	LG/SM \$ ENTITY FEE	ADD'L FEE DUE
TOTAL CLAIMS FEE	38	-	38	0	LG=\$50 SM=\$25	\$0
INDEPENDENT CLAIMS FEE	2	-	3	0	LG=\$200 SM=\$100	\$0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS					LARGE ENTITY FEE = \$360 SMALL ENTITY FEE = \$180	\$0
ADDITIONAL SIZE FEE (IF ANY) (TOTAL PAGES OF SPEC AND DRAWINGS TOGETHER)				\$250 FOR EACH ADDITIONAL 50 SHEETS		\$0
Independent Claims: 1 and 20						TOTAL
						\$0

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box on Col. 1 of a prior amendment or the number of claims originally filed.

☐ A check in the amount of \$ 0 to cover the additional claims fee is enclosed. A copy of this sheet is enclosed.☐ A check in the amount of \$ 0 to cover the extension fee is enclosed. A copy of this sheet is enclosed.☒ The Commissioner is hereby authorized to charge any deficiencies of fees associated with this communication or credit any overpayment to Deposit Account No. 50-1314. A copy of this sheet is enclosed.☒ Any filing fees under 37 C.F.R. § 1.16 for the presentation of extra claims☒ Any patent application processing fees under 37 C.F.R. § 1.17Respectfully submitted,
HOGAN & HARTSON L.L.P.

By:

Darius G. Adli
Darius G. Adli

Registration No. 51,386

Attorney for Applicant(s)

Date: April 4, 2005

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PATENT
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April 4, 2005

Date of Deposit

Diane Zynn

Name

Signature

04/04/05

Date

RESPONSE TO RESTRICTION REQUIREMENT

Mail Amendment

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Dear Sir:

In response to the Restriction Requirement dated March 8, 2005, Applicant elects, without traverse, for prosecution the claims of Group I, claims 1-19, drawn to process, classified in class 438, subclass 110.

If there are any fees due in connection with the filing of this response, please charge the fees to our Deposit Account No. 50-1314.

Respectfully submitted,
HOGAN & HARTSON L.L.P.

Date: April 4, 2004

By:

Darius G. Adli

Registration No. 51,386

Attorney for Applicant(s)

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